



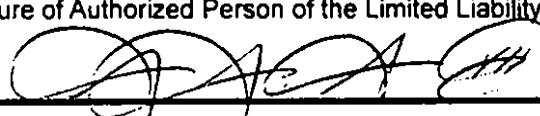
State of Rhode Island
Department of State - Business Services Division

REC'D RIDOS BSD
24 MAR 8 PM 12:19:40

Statement of Change of Agent
DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-16-11 the undersigned limited liability company submits the following statement for the purpose of changing its resident agent in the State of Rhode Island:

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|--|--|
| 1. Entity ID Number 292929 | 2. Exact Name of the Limited Liability Company Bourne to Run LLC |
| 3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 155 South Main Street, Suite 302 | |
| City/Town Providence | State RHODE ISLAND Zip 02903 |
| 4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State: Michael Fitzpatrick | |
| 5. The address of the NEW resident office is: Street Address (<u>NOT</u> a P.O. Box) 4060 Post Road | |
| City/Town Warwick | State RHODE ISLAND Zip 02886 |
| 6. The name of the NEW resident agent is: Sean T. O'Leary | |
| 7. Date when this Statement of Change of Resident Agent will be effective: CHECK ONE BOX ONLY | |
| <input checked="" type="checkbox"/> Date received (Upon filing) <input type="checkbox"/> Later effective date (Date must be no more than 90 days from the date of filing) _____ | |
| <i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Resident Agent by the Limited Liability Company, and that all statements contained herein are true and correct.</i> | |
| Name of Authorized Person of the Limited Liability Company James Sullivan | Date 3/6/2024 |
| Signature of Authorized Person of the Limited Liability Company  | |

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED
MAR 08 2024
BY ML 3501
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